



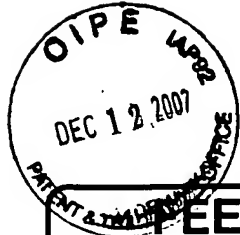
11/29/07

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	10/043,918
		Filing Date	January 11, 2002
		First Named Inventor	Ramesh Pendakur
		Art Unit	2143
		Examiner Name	Pwu, Jeffrey C.
Total Number of Pages in This Submission	17	Attorney Docket Number	42390P11552

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Please see Remarks Section
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input checked="" type="checkbox"/> PTO/SB/08	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<b>Remarks</b> - First Class Certificate of Mailing; - return receipt postcard; - Copy of two of the cited references	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Aslam A. Jaffery, Reg. No. 51,841 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 7, 2007

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Krista Mathieson		
Signature		Date	December 7, 2007



# FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

## Complete if Known

Application Number	10/043,918
Filing Date	January 11, 2002
First Named Inventor	Ramesh Pendakur
Examiner Name	Pwu, Jeffrey C.
Art Unit	2143
Attorney Docket No.	42390P11552

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 180.00

## METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☒ Credit any overpayments
- ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- ☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
14	30*	0	\$0.00
Independent Claims	3	5*	0
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1202	2202	50 25 Claims in excess of 20
1201	2201	210 105 Independent claims in excess of 3
1203	2203	370 185 Multiple Dependent claim, if not paid
1204	2204	810 405 **Reissue independent claims over original patent
1205	2205	810 405 **Reissue claims in excess of 20 and over original patent

\*\*or number previously paid, if greater, For Reissues, see below

SUBTOTAL (1)

(\$) 0.00

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1051	2051	130 65 Surcharge - late filing fee or oath
1052	2052	50 25 Surcharge - late provisional filing fee or cover sheet.
2053	2053	130 130 Non-English specification
1251	2251	120 60 Extension for reply within first month
1252	2252	460 230 Extension for reply within second month
1253	2253	1,050 525 Extension for reply within third month
1254	2254	1,640 820 Extension for reply within fourth month
1255	2255	2,230 1,115 Extension for reply within fifth month
1401	2401	510 255 Notice of Appeal
1402	2402	510 255 Filing a brief in support of an appeal
1403	2403	1,030 515 Request for oral hearing
1451	2451	1,510 1,510 Petition to institute a public use proceeding
1460	2460	130 130 Petitions to the Commissioner
1807	1807	50 50 Processing fee under 37 CFR 1.17(q)
1806	1806	180 180 Submission of Information Disclosure Stmt
1809	1809	810 405 Filing a submission after final rejection (37 CFR § 1.129(a))
1810	2810	810 405 For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$) 180.00

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Aslam A. Jaffery	Registration No. (Attorney/Agent)	51,841	Telephone	(303) 740-1980
Signature		Date	12/07/07		

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 02/26/2007.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

The PTO did not receive the following listed item(s) Charge 8/80.00